

Application Data Sheet**Application Information**

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: ADHESIVE TRANSDERMAL
FORMULATIONS OF DICLOFENAC
SODIUM
Attorney Docket Number:: 2503-1104
Request for Early
Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GIUSEPPE
Middle Name::
Family Name:: PASSONI
Name Suffix::
City of Residence:: MONZA
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA LECCO, 23
Address::
City of Mailing Address:: MONZA
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-20052

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: PAOLO
Middle Name::
Family Name:: CASETTA
Name Suffix::
City of Residence:: BAVENO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: STRADA NAZIONALE SEMPIONE-BAVENO, 3
Address::
City of Mailing Address:: BAVENO

State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-28831

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: PAOLA
Middle Name::
Family Name:: STEFANELLI
Name Suffix::
City of Residence:: LECCE
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA TURATI, 23
Address::
City of Mailing Address:: LECCE
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-73100

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP02/13473	11/26/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI2001A002827	12/28/01	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::